

Appl. No. 09/665,034
Amdt. Dated 12/16/2004
Reply to Notice of Allowance mailed 10/06/2004

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DEC 16 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. :	09/665,034	Confirmation No. 5981
Applicant :	Elissa E. Carapella	
Filed :	09/19/2000	
TC/A.U. :	3729	
Examiner :	Chang, Rick Kiltae	
Title :	METHODS FORMING AN INTEGRATED CIRCUIT PACKAGE WITH A SPLIT CAVITY WALL	
Docket No. :	42390P6139C	
Customer No. :	8791	

Mail Stop ISSUE FEE
Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

RULE 312 AMENDMENT
AFTER
NOTICE OF ALLOWANCE

Dear Sir:

Applicant respectfully thanks the Examiner for the Notice of Allowance issued on 10/06/2004.

In response thereto, Applicant respectfully requests that the following amendments and remarks to the above-identified application be entered.

CLAIM listing begins on page 2.

REMARKS begin on page 9.

CONCLUSION and signature is on page 10.

Docket No: 42390P6139C

1

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TELEPHONE: (714) 557-3800

INTELLECTUAL PROPERTY LAW
12400 WILSHIRE BOULEVARD, 7TH FLOOR
LOS ANGELES, CA 90025

FACSIMILE: (714) 557-3347

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Deliver to: Rick Killae Chang, USPTO
Facsimile No.: 703 872-9303
From: William E. Alford, Reg. No. 37,764
Our Docket No.: 42390P6139C
Application No.: 09/665,034
Art Group: 3729
Date: December 16, 2004
Number of pages 14 including this sheet.
Filing Date: 9/19/2000
Docket Due Date(s):

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: Rule 312 (10 pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (in triplicate) (____ pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: _____ (____ pgs) w/cover & abstract	<input type="checkbox"/> Petition for: _____
<input type="checkbox"/> Assignment & Cover Sheet (____ pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Certificate of Facsimile	<input type="checkbox"/> Reply Brief (____ pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA (____ pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: _____ sheets, _____ figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: _____	<input type="checkbox"/> Response to Written Opinion (____ pgs)
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 (____ pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.84)

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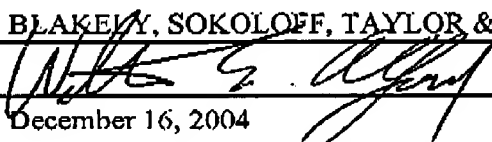
Pat Sullivan 12/16/2004
Pat Sullivan Date


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If you do not receive all the pages, or if there is any difficulty in receiving, please call: (714) 557-3800 and ask for Pat Sullivan.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	09/665,034
		Filing Date	September 19, 2000
		First Named Inventor	Carapella, et al.
		Art Unit	3729
		Examiner Name	Rick Kiltae Chang
Total Number of Pages in This Submission	14	Attorney Docket Number	42390P6139C

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">Rule 312 Amendment After Notice of Allowance; Facsimile Transmittal Sheet</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William E. Alford, Reg. No. 37,764 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	December 16, 2004

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Pat Sullivan	Date	December 16, 2004
Signature			

Based on PTO/SD/21 (04-04) as modified by Blakeley, Sokoloff, Taylor & Zafman (w/r) 09/04/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		<i>Complete if Known</i>		
		Application Number	09/665,034	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	September 19, 2000	
		First Named Inventor	Carapella, et al.	
		Examiner Name	Rick Kiltae Chang	
TOTAL AMOUNT OF PAYMENT (\$)		0.00	Art Unit	3729
			Attorney Docket No.	42390P6139C

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) <input type="checkbox"/> Credit any overpayments	
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	

FEE CALCULATION				
1. EXTRA CLAIM FEES				
Total Claims	26	20	0	50.00
Independent Claims	4	4	0	200.00
Multiple Dependent				
Large Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)
	1202	50	2202	25
	1201	200	2201	100
	1203	360	2203	180
	1204	300	2204	150
	1205	300	2205	150
SUBTOTAL (1)		(\$)	0.00	
2. ADDITIONAL FEES				
Large Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)
	1051	130	2051	65
	1052	60	2052	25
	2053	130	2053	130
	1251	120	2251	60
	1252	450	2252	225
	1253	1,020	2253	510
	1254	1,580	2254	795
	1255	2,160	2255	1,080
	1401	500	2401	250
	1402	500	2402	250
	1403	1,000	2403	500
	1451	1,510	2451	1,510
	1460	130	2460	130
	1807	50	1807	50
	1808	180	1808	180
	1809	790	1809	395
	1810	790	2810	395
Other fee (specify)				
SUBTOTAL (2)		(\$)		

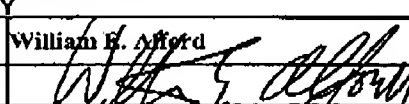
SUBMITTED BY		<i>Complete (if applicable)</i>	
Name (Print/Type)	William E. Akord	Registration No. (Attorney/Agent)	37,764
Signature		Telephone	(714) 557-3800
		Date	12/16/04

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (v. 12/15/2004)
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005 <i>Patent fees are subject to annual revision.</i>		Complete if Known	
		Application Number	09/665,034
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	September 19, 2000
		First Named Inventor	Carapella, et al.
		Examiner Name	Rick Kiltae Chang
TOTAL AMOUNT OF PAYMENT (\$)		0.00	Art Unit Attorney Docket No. 3729 42390P6139C

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	William E. Alford	Registration No. (Attorney/Agent)	37,764
Signature		Telephone	(714) 557-3800
		Date	12/16/04

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/ 12/15/2004).
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450